

# Annual Report

## 1990-1991

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# Chairman's Report

Advocacy for the health care needs of Western Maryland coupled with team work are the foundation for the success of the Western Maryland AHEC. The team, a cast of hundreds, is comprised of dedicated health professionals, educators, consumers and legislative representatives throughout our service region; the forward thinking administration and faculty of the University of Maryland; the members of the Maryland Statewide Medical Education and Training System; and the Maryland State Government.

An AHEC is a unique relationship between health care representatives of a rural region, a major medical university, the state government and the federal AHEC office. The relationships are designed to build resource bridges between regions of a state. The AHEC concept works. For fifteen years, the Western Maryland AHEC has created innovative programs to address a full continuum of health issues by utilizing the resources and talents of team members from throughout the State of Maryland. We build coalitions and networks of people and agencies to address regional needs and problems.

On behalf of the entire Board of Directors and the AHEC staff, I thank all who are involved in the work of the AHEC. The University of Maryland is to be commended for its foresight in reaching out to the westernmost part of the State consistently and continually for fifteen years. The AHEC's growth is attributable in large part to the University's vision of outreach programming. The concept of outreach programming is growing throughout the nation. In Maryland we are not just beginning outreach work, we are expanding our commitment to outreach efforts.

During the last fiscal year, the AHEC grew in its ability to serve the community because of an increase in funding support received through the University's reorganization of existing state funds. This support allowed us to address several long-standing staff shortages and to reorganize some staff functions. Unfortunately, during the year we experienced a mid-year budget reduction due to the State funding crisis, and the reorganization plans were curtailed. Listening to the economic forecast for the State and the nation, funds will continue to be tight. These fiscal restraints will call for innovative programming to maximize the results of each dollar invested in improving health care delivery.



Anthony Bollino, MD  
Chair, Board of Directors

The Western Maryland AHEC will continue to seek support for the programs developed to meet the regional needs. The *Eastern Alleghenies Health Careers Opportunity Program* (HCOP) is an example of our determination to continue despite financial adversity. The HCOP proposal for a second phase of funding was approved but not funded. We will support this program at a basic level while seeking alternative funding sources.

On the positive side of funding news, the Federal AHEC office will support our implementation of the two year project *Educational Placement Initiatives to Support Rural Care*. This program will add the link of "new professional" recruitment between our *Clinical Education Program* and the AHEC's work to support retention of health professionals in Western Maryland through continuing education programs, learning resource services, and special initiatives projects such as the two year *Rural Training Initiatives in Adolescent Health*. We are very pleased with the enthusiastic response to the adolescent program. With the implementation of this project, our region is well ahead of the nation in addressing the health care service problems faced by our youth.

These are challenging times. They will not be without organizational and personal pain. Yet, the AHEC remains firmly committed to attracting students to the health professions, providing clinical education experiences, and supporting retention activities. I believe the resourcefulness of the AHEC volunteers and staff will remain the strength of the agency and will see it through these challenging times.

*A. Bollino, MD.*

# Director's Message

It appears that numbers make the world go round. Too high or too low and the numbers call for a response. In our nation, the health care industry's numbers, both high and low, are under intense scrutiny. It appears that major changes are in the offing for health care.

More money is spent on health care services in the United States than ever before. The health care portion of the GNP is climbing over 11%. Hospital revenues are generally up. Physician incomes also are reported to be up. There are other numbers of health care importance which are down. The number of people with health insurance is down. The uninsured in the USA number more than 33 million people! There also are increasing numbers of underinsured due to reductions in policy coverage, prohibitive medical underwriting, and unmanageable rate increases.

Also down is the number of available qualified health care personnel - particularly in the primary care, technological and rehabilitation fields. These down numbers restrict the availability of quality health care, and put general health care further and further beyond the reach of more persons. Rural areas are being most severely affected by all these changes, but especially by these personnel shortages.

What do these up and down numbers represent for a health care personnel development organization such as the Western Maryland AHEC? Two factors seem particularly evident. One is the need for interdisciplinary input in the change processes which are underway. The Western Maryland AHEC's concern about these processes is currently evident in its sponsorship of health planner and futurist Dr. Lee Kaiser's seminar visit to Western Maryland and in the development of the GGEAR report.

The second factor is the need for the development and nurturing of health care personnel - in terms of recruitment, retention, and new professional training. Availability of health personnel looms as an escalating crisis which will affect the entire region by the end of the decade. The role of the AHEC may never have been so clearly defined as it is seen against the backdrop of current events and trends in health care. So much to be done with modest resources. The major challenges ahead will call for the creative best in us all!

The AHEC Board of Directors, the Interdisciplinary Health Education Council and Caucuses continue to be



Donald L. Spencer  
Executive Director

the foundation for AHEC action, and we are indebted to Dr. Bollino, Donna Walbert, and so many other volunteers for their longstanding leadership and support. The Western Maryland AHEC is an area based educational service organization working with the University of Maryland, and we continue to be proud of the local commitment and appreciative of the excellent support we have received from UMAB officials for our mission and work.

This year the organization was successful in operating its existing professional development programs at perhaps the highest level of overall performance of any year in the Western Maryland AHEC history. The additional resources provided through the decision making at UMAB made it possible to add more time to the hours of a greatly over-extended staff of a year ago.

The *Clinical Education Program* improved both in numbers and in program quality and diversity. The *Eastern Alleghenies Health Careers Opportunity Program* enjoyed its most effective year working with its seven county district. The Federal AHEC Special Initiative Program on *Rural Training Initiatives in Adolescent Health* had an outstanding beginning year. The Learning Resource Center had its most impressive year of planning and services in its 10 years of operation.

This success is attributable to the dedication and hard work of the entire AHEC staff, coupled with excellent receptivity and cooperation of community health professionals and various volunteer services of area hospitals, agencies, and other institutions. To all who contributed to a successful year, Thank You.



# IHEC Report



Donna Walbert, RN, MS  
IHEC Chair

The AHEC in Western Maryland and other AHECs throughout the nation are based on a concept of interdisciplinary programming developed through the participation of, and the interaction between members of the health professional communities and consumers. It takes many creative, helping hands to make the AHEC concept work, but this networking creates some very dynamic programming.

It is the IHEC members who in addition to being responsible for program oversight, assume primary responsibility for the generation of new program priorities and opportunities for the Western Maryland AHEC. The IHEC members from the six professional caucuses and those who are consumer representatives are the vital link to the various needs and desires of health professional and consumer communities. These members bring their colleagues' thoughts and sometimes frustrations to the attention of the AHEC. Every health professional is vital to this networking process.

One of our main tasks during this past year and one that we will continue in the upcoming year will be to help our caucuses and the IHEC re-examine goals and objectives as well as program opportunities. Self-evaluation at all levels is critical in these fiscally restrained and changing times. Towards this purpose, the IHEC is beginning to plan an organizational retreat to formulate the AHECs' directives for the next five years.

The AHEC concept works best with the active participation of the caucuses and committees. This coming year promises to be a very challenging and exciting time. I urge you to remain involved and active!

*Donna Walbert*

# Program Continuum

The health professional needs of Western Maryland are very diverse. The Western Maryland AHEC works to cover this broad spectrum of needs by developing, implementing, and supporting programs that address the continuum of health professional development which includes:

- ☐ *Entry*--recruitment toward or into a health profession at all age levels such as during elementary, middle, or secondary school age, college age, or perhaps an older adult seeking a new career
- ☐ *Academic training*--the didactic portion of education which enables one to become credentialed in a health profession
- ☐ *Clinical education*--that portion of education involving hands-on, supervised practice with patients that also leads to credentialing
- ☐ *Placement*--finding a location or setting in which the professional conducts her/his licensed practice
- ☐ *Networking*--affiliations with other similarly credentialed persons within one's own profession and across professions
- ☐ *Retention*--access to the latest information and top-notch resources in the clinical setting, through continuing education, library services, teaching and consulting opportunities, etc.
- ☐ *Advocacy*--opportunities to influence or direct policy changes that benefit the profession and/or patients

Many of the Western Maryland AHEC's programs and services, such as the Learning Resource Center and the GGEAR project, provide support across the continuum of health professional development. Other programs target one component of the continuum. The following sections of this annual report highlight the programming efforts of fiscal year '91.

# Student Comments

1990 - 1991

"I've become more of a professional and my book skills have become hands on skills. I'm still learning but I feel more confident."

"This was probably the best rotation so far in medical school."

"I was really surprised to find that even a rural practice is anything but isolated...they even have the latest drugs, medicare, drug reps, grand rounds, and paperwork."

"I learned from the staff regarding management decisions, insurance claims, economics of practice."

"My experience was better than my expectations. I really developed a good one-on-one working relationship with my preceptor and the other physicians in the office. I learned a lot of practical medicine."

"I think the AHEC program really complimented my UMAB education. I learned a lot of things here that I would not get in Baltimore."

"Preceptor was very hard working, knowledgable, and willing to teach and gave students a lot of responsibility."

"My preceptor did an excellent job of teaching in a very low stress environment. I was able to examine a large volume of patients and feel much more confident with my physical exam skills."

"Meeting other students from Maryland, Delaware, PA, and from med school, OT, UMAB Pharmacy has given me the confidence about my professional choice of pharmacy that I've been looking for in the past 4 1/2 years of college."

"Dedication to the profession and to the patients is very important in a rural area in order to be successful. Often, this means long hours and going out of your way for others."

"I very much enjoyed the more rural setting. I will likely end up working in a community hospital setting in a small to medium sized city."

"I thought medicine here would somehow be 'primitive'. The practice of medicine here in Cumberland is just as sophisticated as in Baltimore."

"My preceptor had an 'atypical' entrance to medicine, as I have - I think we were able to appreciate one another's backgrounds - I know I gained a lot from this placement."

"The characteristics of my preceptor helped me to accomplish most things I would never of dreamed of doing myself. My supervisor showed great confidence in me and helped to improve my self esteem and courage, which helped my patients."

"I really enjoyed my experience here at Western Maryland AHEC and will highly recommend this program to other students."

"Both preceptors were tremendous help since they were able to listen to me and considered my input as an important part of the management of the patients."

# Clinical Education



John Zapas, an ambulatory care student from UMAB School of Medicine, listens to his preceptor James Bosley, MD. Over 100 Western Maryland health professionals serve as preceptors in the *Clinical Education Program*.

The *Clinical Education Program* curriculum for students and residents has two basic components. The first component is a one-to-one participation with a preceptor which is designed to provide practical experience in small city and rural health care practice and procedures. Over 100 area health professionals are part of this group of dedicated professionals who serve as preceptors. The second component is an interdisciplinary curriculum which is designed to help students and residents grow in their understanding of patients and other health professionals, and to influence greater professional satisfaction by working together in a team relationship. This component includes an introductory orientation and tour, elective site visitations, interviews with other health professionals, seminars utilizing local professionals, and case presentations all done with an interdisciplinary focus in mind.

Fiscal year '91 was a time of expansion for Western Maryland AHEC's *Clinical Education Program* and saw a 23% increase in the number of students over last year. A total of 79 students completed 84 professional experiences ranging from one week to 12 weeks in length. This shows a significant numerical increase over last year's participation. Nine different universities and colleges were represented. The students also represented a diverse group of professions with 28 pharmacy students, 27 medical students, 14 physical therapy students, 7 occupational therapy students and the remainder from dental,

medical technology, physician's assistant, recreational therapy, psychology, social work and public administration programs. Students were placed consistently in all three counties of the service region.

The *Clinical Education Program* was active over the last year in several different areas. Recruitment efforts continue with talks with students on an individual and group level, brochures being mailed, etc. An effort was made to consistently expand the number of qualified preceptors to accommodate the increase in students. Faculty status was gained for medical preceptors who meet the University criteria. Seminar speakers and tour stops were added to the list.

Students that come to Western Maryland also get a chance to live in the mountains, take part in social functions, recreational opportunities and generally experience what living in a rural area would be like for a health care professional. The combination of excellent preceptors and beautiful environment must be working as the numbers of students continues to grow.

The *Clinical Education Program* is coordinated by Ruth Wood, BSN, MS.



Charles Ifeakor, PharmD, Director of Clinical Pharmacy Services at the Finan Center and an AHEC preceptor, with Joe Price, a pharmacy student from Duquesne University - Dr. Ifeakor also served as preceptor to Thomas Means and Julie Jannuzi from UMAB School of Pharmacy and Rebekah Hott from West Virginia University School of Pharmacy.

# Clinical Education Program

*University of Maryland at Baltimore*

July 1, 1990 - June 30, 1991

## School of Medicine Ambulatory Care Program

<u>Preceptor</u>	<u>Student</u>	<u>Location</u>
Rex Archer, MD, MPH	John Pabers	Garrett Co. Health Dept.
Kheder Ashker, MD	Harold Pikus	Private Practice
Gregory Beyer, MD	William Todd	Memorial Hospital Emergency Dept.
Anthony Bollino, MD	Jennifer Hollywood	Private Practice
James Bosley, MD	John Zapas	Private Practice
Thomas Chappell, MD	George Cockey	Braddock Medical Group
	Thomas Hickey	
Robert Coughlin, MD	Bertan Ozgun	Private Practice
Gordon Earles, MD	John Pabers	Gar. Mem. Hospital Emergency Dept.
C. W. Fedde, MD	Chuka Jenkins	Private Practice
Raul Felipa, MD	Nicholas Andrews	Private Practice
	Michael Schweitzer	
Martin Gallagher, Jr., MD	Sally Bridgman	Antietam Family Practice
	Patricia Watkins	
	Janet O'Mahony	
Michael Gayle, MD	George Ulma	Berkley Springs Medical Associates
Margaret Kaiser, MD	Erin Ozgun	Private Practice
	James Poulton	
	Chris VanBeneden	
William Kerns, MD	Yared Aklilu	Antietam Family Practice
	Valerie Curry	
	David Goldenberg	
William Lamm, MD	Jordan Berne	Private Practice
Herbert Leighton, MD	John Pabers	Private Practice
Michael Levitas, MD	Theresa Kehoe	Children's Medical Group
	Zinon Pappas	
Victor Mazzocco, MD	Theresa Kehoe	Braddock Medical Group
Elmaslias Menchavez, MD	Thomas Hickey	Private Practice
Mark Myers, MD	William Todd	Memorial Hospital Emergency Dept.
Eugene Nallin, MD	Dana Silver	Hyndman Area Health Center
Walter Naumann, MD	Harold Pikus	Private Practice
Susan Nuber, MD	Zinon Pappas	Children's Medical Group
William Oster, MD	Jordan Berne	Memorial Hospital
Martha Riggle, MD	Sally Bridgman	Antietam Family Practice
	Janet O'Mahony	
Karl Schwalm, MD	Chuka Jenkins	Garrett Medical Group
Harjit Sidhu, MD	William Todd	Private Practice
Andrew Stasko, MD	Harold Pikus	Private Practice
Jeffrey Taylor, MD	Yared Aklilu	Antietam Family Practice
	Valerie Curry	
Stephen Typaldos, DO	William Todd	Memorial Hospital

### Family Practice Elective

<b>Preceptor</b>	<b>Student</b>	<b>Location</b>
James Bosley, MD	Daniel Crable	Private Practice

### Department of Medical and Research Technology

Warren Wagner, BS	Jeff Humberson	Memorial Hospital Laboratory
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### Department of Physical Therapy

John Dickerhoff, PT	Brenda Crable	Memorial Hospital Phys. Therapy
Theresa Hannibal, PT	Kelly Nanzetta	Gar. Mem. Hospital Phys. Therapy
Donald Heare, PT	Brenda Crable	Progressive Phys. Therapy
William Rhodes, PT	Nicole Jacaruso	Sacred Heart Phys. Therapy

### Baltimore College of Dental Surgery, Dental School

Lynne Brodell, DDS	Maria Pardo	Private Practice
Barry Conger, DDS	Maria Pardo	Private Practice
John Davis, DDS	Maria Pardo	Private Practice
Michael Granet, DDS	Maria Pardo	Private Practice
Fred Schindler, DDS	Maria Pardo	Private Practice

### School of Pharmacy Professional Experience Program

John Balch, RPh	Keith Broome	Bedford Road Pharmacy
Gerald Beachy, RPh	Scott Kirkpatrick	Beachy's Pharmacy
John Beckman, PD	Jason Kirby	Greene Street Pharmacy
	Todd Stephens	
	Dina Giganti	
Tom Bolt, PD	George Lauder	Medicine Shoppe
	Jeanne Jacobsen	
Monte Festog, PharmD	Stephanie Cox	Wash. Co. Hospital Pharmacy
	Julie Kubitsky	
	Jeff Clark	
Wes Hahn, RPh	Mark Walls	Revco Drug Store
Harold Harrison, RPh	Jeff Clark	Frost. Com. Hospital Pharmacy
Gerry Herpel, RPh	Michelle Apuzzio	Deep Creek Pharmacy
Steve Hospodavis, RPh	Scott Kirkpatrick	Steve's Pharmacy
	Weiraymond Lee	
Charles Ifeachor, PharmD	Thomas Means	Finan Center
	Julie Jannuzi	
Robert Martin, Jr., RPh	Todd Stephens	Potomac Valley Pharmacy
Richard Ottmar, RPh	Devi Koung	Sacred Heart Hospital Pharmacy
	Jody Whetstone	
Raymond Spassil, RPh	Bang Hee Kim	Memorial Hospital Pharmacy
Brad Thomas, RPh	Abigail Nejfelt	Medicine Shoppe

# Clinical Education Program-*cont.*

## School of Social Work

<u>Preceptor</u>	<u>Student</u>	<u>Location</u>
James Sheehe, LCSW	Mike Brandes	Mem. Hos. Dept. of Social Services

## *University of Maryland System*

### Occupational Therapy Program

<u>Preceptor</u>	<u>Student</u>	<u>University/College/Program</u>
Lydia Martin, MA, OTR/L	Mary Michelle Bohle	Towson State University
	Wendy Radonovich	Towson State University
	Jill Stevens	Towson State University
	Kristen Harmon	Catonsville Community College

## *Participants from other Programs*

### Occupational Therapy

Lydia Martin, MA, OTR/L	Linda Guyer	Mt. Alloysius College
	Kerri Slavin	Elizabethtown College
	Karen Peters	Elizabethtown College

### Pharmacy

John Balch, RPh	Stephen Olesko	Duquesne University
Gerald Beachy, PD	Stephen Letrent	Duquesne University
Tom Bolt, PD	Mary Jo Anderson	Duquesne University
Steve Hospodavis, RPh	John Aber	Duquesne University
Charles Ifeachor, PharmD	Rebekah Hott	West Virginia University
	Joe Price	Duquesne University

### Physical Therapy

John Dickerhoff, PT	Tammie Saylor	West Virginia University
Theresa Hannibal, PT	Mindy Ernst	West Virginia University
William Rhodes, PT	Drew Summers	West Virginia University
Michael Staggers, MS, PT	Suzanne Cox	West Virginia University
	Matt Roman	West Virginia University
	Connie Spurlock	West Virginia University
	Nancy London	West Virginia University
	Andrea Massie	West Virginia University
	Beth Pinti	West Virginia University
	Lisa Whitt	West Virginia University

## *Participants from other Programs - cont.*

### **Physician's Assistant**

<b><u>Preceptor</u></b>	<b><u>Student</u></b>	<b><u>University/College/Program</u></b>
Anthony Bollino, MD	Heather Bates	Alderson-Broadus College
Wayne Spiggle, MD	Heather Bates	Alderson-Broadus College

### **Counseling - Psychology**

Conrad Cole, PhD	Suanne Ostendorf	West Virginia University
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### **Public Administration**

Donald Spencer, MPA	Gene Turner	West Virginia University
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### **Recreational Therapy**

Terry Michels, CRTS	Melissa Copeland	West Virginia University
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### **Medicine**

Walid Hijab, MD	Juraj Detvay	UK University, Czechoslovakia
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Students in the Clinical Education Program value the quality time that they are able to spend with patients and preceptor. Pictured is Heather Bates, a physician's assistant student, with a patient in Dr. Bollino's office.



# Learning Resource Services



Lights! Camera! Action! Dr. Robert Brodell of the Children's Medical Group was a "star" in the commercial produced with WHAG-TV of Hagerstown to promote health professional use of GRATEFUL MED Software.

Outreach activities were the primary focus of the Western Maryland AHEC Learning Resource Center (LRC) during fiscal year '91. The work in the health professional communities of Western Maryland and the Tri-state region was possible through the support of the *Western Maryland Outreach Pilot Project* by the Region 2 Southeastern/Atlantic Regional Medical Library Services (SE/A RMLS). Even traditional services offered by the LRC showed a significant increase in use which is attributed directly to the outreach programming efforts of developing an awareness of medical information services available in the region.

The LRC activities were implemented by Kathy Lese, MT, MA, Learning Resource Services Coordinator and Outreach Project Coordinator; Michele Beaulieu, RN, Library Associate; and the continued tireless volunteer dedication of Nellie Mock, RN, RSVP volunteer.

During the year, the LRC collection was moved within the Center to a quieter, more private location. Computer and phone lines were added to the new library allowing the addition of a Macintosh computer with modem for patron use. The *Clinical Education Program* students appreciate having 24 hour access to the computer equipment and the library collection while on rotation in Western Maryland. The LRC is available to other patrons during normal business hours and in the evenings by appointment.

In addition to new acquisitions, the LRC's collection was enhanced this year by several donations including a set of dental continuing education videos from the Howard Dental Group; Primary Eye Care in

Developing Nations from the author, Dr. Larry Schwab; and Rapid Interpretation of EKG's, 3rd ed., from Dr. Robert Haddon, a former clinical education student. The LRC also was instrumental in securing the donation of the library collection from the recently closed Homewood Hospital Center in Baltimore for use by the Western Maryland health professional community. The collection will be housed at Memorial Hospital and Medical Center in Cumberland.

Several new proposals seeking funds to continue and expand the outreach programming that is so needed and welcomed in the Tri-state region were submitted this year. Decisions on these applications will be made in late summer and early fall. One proposal seeks to help practitioners install GRATEFUL MED software on personal or office computers; will provide training programs on database searching; and will support the use of GRATEFUL MED and LOANSOME DOC. LOANSOME DOC is a new service provided by the National Library of Medicine (NLM), which is designed to link GRATEFUL MED users to GRATEFUL MED libraries for the electronic submission of journal articles or other resource material requests.

The second proposal seeks a NLM Information Access Grant to enable the networking of health science, academic and public libraries in the Western Maryland/Tri-state area. Titled "Access Computer Technology -- The Information Outreach Network (ACTION)," the proposal seeks funding for computer and telefacsimile equipment, training in electronic networking, and support of information services in nineteen regional institutions and libraries.

*The Learning Resource Center is a member of the Regional Medical Library Network, the Maryland Health Science Library Network, the Maryland Interlibrary Loan Organization, the West Virginia Health Science Libraries Association, the Medical Library Association and the Mid-Atlantic Chapter of the Medical Library Association.*



## Outreach Pilot Project Report

*The Western Maryland Outreach Pilot Project was designed to reach rural health professionals, educators, and students scattered throughout the 4,418 square miles of the project target area, and to create for them an awareness of informational resources accessible in the rural area.*

Begun in March of 1990, the Outreach Project was supported by the Region 2 Southeastern/Atlantic Regional Medical Library Services (SE/A RMLS) program. SE/A RMLS is one of seven branches of the NLM located across the United States for the purpose of coordinating information services carried out through a nationwide network of more than 4,000 health science libraries and information centers.

The educational awareness program of the project focused primarily on using GRATEFUL MED software which is compatible with IBM and Macintosh computers. GRATEFUL MED, first developed in 1986 by the NLM, allows easy and economical access to over 40 databases in NLM's MEDLARS/TOXNET system, including access to over 3,500 biomedical journals in the MEDLINE database.

Using a portable computer with modem, a printer and an overhead projection panel, the staff completed sixty-four GRATEFUL MED demonstrations which were attended by 467 practitioners, educators, and students. In addition, 72 "Awareness of Information Resources" presentations informed 535 persons about local information resources, library services, and computerized access to biomedical literature with NLM's GRATEFUL MED. LRC staff also conducted eleven seminars for students in the AHEC *Clinical Education Program*, the *Nursing Outreach Program*, and the *Eastern Alleghenies Health Careers Opportunity Program* (HCOP).

Exhibits and presentations at continuing education programs, national and regional meetings also were used to conduct outreach activities. Exhibits were conducted for: "Changing Your Heart's Lifestyle in the 90's...Cardiovascular Disease Prevention," cosponsored by the American Heart Association, and Allegany Community College; "1991 Environmental Expo," sponsored by the Allegany County Health Department; and "Critical Health Issues Facing Teens and Community Resources to Deal With Them," sponsored with the Allegany Community College, and the American Heart Association. At the SE/A RMLS Regional Advisory Council Meeting committee members from eleven states were introduced to the Western Maryland AHEC outreach activities. "Electronic Networking" was the topic presented at the Annual Meeting of the Mid-Atlantic Chapter Medical

Library Association. A poster presentation was made at the Medical Library Association Annual Meeting, and an abstract on the project will be presented at the National AHEC Meeting.

Outreach project planning team members Faith Meakin, SE/A RMLS Executive Director, Jean Shipman, SE/A RMLS Coordinator, and Adam Szczepaniak, Maryland Med-Chi Library Director, visited the AHEC in late July. They toured five hospitals, two colleges, and one public library during the site visit. At each institution, agency administrators welcomed the project team and introduced them to the rural health care picture in Western Maryland and the Tri-state area. Also, an area librarians' luncheon meeting brought together seventeen representatives from ten hospitals and libraries to meet the outreach project team. This initial meeting was followed by two group training sessions addressing local information resources, resource sharing, and computerized access with GRATEFUL MED and DOCLINE. Individual training sessions were held at two hospitals. One health department installed GRATEFUL MED, one hospital became a DOCLINE participant, and two hospitals are preparing DOCLINE applications.

A brochure that not only publicizes the library services, but also provides information on GRATEFUL MED, LOANSOME DOC, DOCLINE, and MEDLINE was developed to support outreach efforts. A *Guide to Information Resources* listing agencies involved in the outreach network, as well as information services available through the agencies, also is being distributed to support the project efforts. In addition to newsletter, newspaper, and radio publicity, access to biomedical information was promoted by advertising GRATEFUL MED on commercial television. A thirty-second spot was aired on WHAG-TV, an NBC affiliate. The purpose of the commercial was to create an awareness of GRATEFUL MED as an educational tool for health professionals, even when they are miles away from a library. WHAG-TV matched the purchased air time with public service time.

Outreach efforts are needed and supported in our service region. The Western Maryland AHEC looks forward to continuing and expanding LRC outreach efforts in the coming year.

# Adolescent Health Initiative



Washington County Adolescent Health Coalition members Patsy Ardinger, RN; John Neill, MD; Betty Shank, RN; and Suzanne Rohrer, CRNP, all from the Washington County Health Department pose after a meeting.

Coalition building might be the "buzz word" for the *Rural Training Initiatives in Adolescent Health*. This program, coordinated by Susan Davis, is helping to focus regional attention and energy towards the development of adolescent health services. Committees of concerned health professionals, citizens, and educators are at work developing and implementing new solutions to a variety of problems that face adolescents in obtaining health care services. The multi-pronged approach of the various committees in Allegany, Garrett and Washington counties includes planning continuing education programs for health professionals, establishing pilot school health service programs, conducting consumer action programs for adolescents, and even sponsoring innovative drug-free dances. The training initiative is supported by the Department of Health and Human Services, the Bureau of Health Professions, AHEC Division.

Here's a sampling of the efforts underway through this training initiative:

**Health Professional Education:** A series of continuing education programs intended to provide health professionals with information on current issues in Adolescent Medicine are planned throughout the grant. A program devoted to health educational resource awareness for school nurses and guidance counselors was presented in Allegany and Garrett counties on April 10, 1991. On October 3, a program on causes and prevention strategies for teen pregnancy in Appalachia will be presented as part of the Western Maryland Guidance Counselors Fall Workshop. Later that month on October 24 and 25, Marianne Felice, MD, Chief, Adolescent Medicine Division, Dept. of Pediatrics at UMAB, will present a physicians' update on current issues in adolescent medicine in each county of the service region.

Also scheduled for the Fall is a program called "Interviewing Techniques for Adolescents." Developed by Jonathan Sutton, MD and Hoover Adger, MD, of the Johns Hopkins School of Medicine, the program is designed to enhance the awareness of physicians when interviewing

adolescents. There also will be a training seminar on how to teach parenting skills conducted for WIC staff members who provide child formula coupons for disadvantaged families. Under the grant program, six to eight seminars in adolescent medicine will be offered for health professional students in the AHEC *Clinical Education Program*.

**Congressional Field Hearing :** A Congressional Field Hearing is planned for the Spring of 1992. Touching the needs of all counties in the service region, the hearing will be held in Cumberland which is a central geographic point. Its purpose is to increase legislators' awareness of the need for continued funding in the field of adolescent health care, and to help educate health professionals, educators and consumers in the region about adolescent health care needs.

**School Health Services:** Model demonstrations of school health services will be set up in each of the three counties. Beall Middle/High School will house the model in Allegany county; Northern Middle/High School will house the Garrett county model; and South Hagerstown High will house the Washington county model. The model demonstration concept is designed to provide an adolescent health service at no cost to the host school. It will collect data on whether this type of service meets the needs of area adolescents. Additional funding beyond the scope of the initial grant is being supplied by the county health departments, state funds, Boards of Education, local hospitals, and the Division of Adolescent Medicine at UMAB School of Medicine.

**Child Parenting Institute:** This is a new organizational concept designed to intercede into dysfunctional family settings through education and counseling. Currently within the tri-county area, Allegany and Washington counties are exploring funding sources to develop the model program.

**Teen Pregnancy and Parenting:** Programs in the area of teen pregnancy and parenting

are being developed with the assistance of the area school boards, communities, county Health Departments, and the Interdepartmental Committees on Adolescent Pregnancy and Parenting. The AHEC currently is researching a grant for the area wide development of teen day care centers to be placed in area high schools. There is also an extensive parenting education program for teen parents in all three counties. In addition to these programs, the Adolescent Coalition is adapting the Governor's Council on Adolescent Pregnancy media campaign to educate communities about the problems of teen parenting.

**Teen Advisory Councils:** In designing and developing new programs, it is very important to receive input from the people that the programs will service. Teens from the region are serving on councils which advise the Adolescent Health Coalition. The input from these adolescents is invaluable in designing programs that will be well received by adolescents.

**Support Group Development for Teens:** This committee's purpose is to develop and to increase the number of self help groups, like Alcoholics Anonymous and Narcotics Anonymous, in the three counties. Currently, existing groups in Washington and Allegany counties are being surveyed in an attempt to determine whether the programs require expansion. The support committee also works with area Maryland Student Assistance Program teams (MSAP) to further develop needed support programs in area high schools.

**Temporary Shelter for Adolescents:** The Child Abuse Task Force in Washington county, under the leadership of Richard Stanzione, is coordinating the application for federal funds to establish a temporary shelter to house adolescents in Washington county. If funded, the community based shelter will address the immediate needs of runaways, homeless youths, and their families.

**Consumer Education:** This program is using an adolescent consumer health

information curriculum designed to increase an adolescent's awareness of accessing the health care system. This curriculum will encourage the student to use the health care system, to ask intelligent questions, and to provide adequate information so that the health care provider can properly understand the needs of the adolescent. In Washington county the P.A.C.T. (Participatory and Assertive Consumer Training) program will be used with demonstration groups from Hancock High School and South Hagerstown High School. The project in Allegany county will provide four drug free dances. It supports student participation in the Life Scene Improvisational Theatre.

**Directory Distributions:** The *Adolescent Health Services Directory* for each county lists and describes the adolescent health services available in that county. The directory was distributed to all health professionals, guidance counselors, hospitals, and volunteer agencies in the three counties. It is available to anyone who is interested in adolescent health issues. The directory is meant as a resource to enable health professionals and other concerned adults to refer to and access needed adolescent support services.

To all who are helping with the implementation of these projects, thank you!



The Life Scene Improvisation Theatre Group of Allegany County is helping adolescents learn about being better health care consumers. The group participated in the April 10th program - Critical Health Issues Facing Teens.

# HCOP



Chris Montgomery, a radiographer at Memorial Hospital, uses an x-ray film to explain a diagnostic procedure to HCOP students on a tour of the hospital.

In its third year of operation, the *Eastern Alleghenies Health Careers Opportunity Program* (HCOP) has emerged as a major health career information resource in the region. The program receives tremendous cooperation and support from regional school counselors and health professionals in its continuing efforts to raise student awareness of the wide variety of health careers.

HCOP's involvement in the schools has led to many community based invitations to participate in career and health fairs, Medical Explorer's Post and Health Occupations Students of America activities. In addition to the program's work in the schools during the past year, HCOP received many other youth and adult referrals from school counselors and teachers, health professionals, hospitals, Vocational Rehabilitation counselors, and Job Training Partnership Act counselors. Typically, HCOP is receiving nearly 12 calls a week from school counselors seeking answers to student questions about health occupations and educational training pathways. With an average high school student to counselor ratio of 327:1 in our region, HCOP is viewed as a tremendous health career guidance resource. "I feel that referring students to HCOP staff has benefitted my students immensely. When it comes to health career specific information, HCOP is the expert," states one local counselor.

The program is supported through the Division of Disadvantaged Assistance, Public Health Services, Department of Health and Human Services. This past year, the HCOP staff spoke with over 540 high school students in the seven county Western Maryland, West

Virginia, and Pennsylvania region. During health career presentations, HCOP staff explained the diversity of careers in the health field, highlighted particular local and national high demand occupations and addressed the educational pathways for achieving these goals. Using an interactive format, students were encouraged to ask questions about the careers and relate their strengths and interests to the health field. Following the HCOP school presentations, 82% of the students indicated that they would now consider a career in the health professions. Overall, 88% of the students who attended an HCOP presentation reported learning new information about health careers. Students commented: "She (the speaker) was very helpful in introducing new careers and explaining what they do." "I thought the presentation was a wonderful source of information and was helpful to my future career goals and decisions." "Never knew there were so many careers in health!"

With the invaluable help of more than 60 Maryland, West Virginia, Pennsylvania, and Virginia area health professionals, over 100 teens had an opportunity to tour health care facilities or shadow a health care provider at work. Individual practitioners welcomed students into their hospitals, clinics, and private practices. They took time from busy schedules to explain their work to HCOP students. These interactions with practicing health professionals allowed students to realistically see the types of services and daily tasks performed by specialists from phlebotomists to physicians. Sue Dotson, Health Careers Education Specialist, believes that, "Overwhelmingly, student commitment to a health career goal is strengthened through the healthsite experience." Evaluations completed by students after their healthsite experiences show that 87% felt that this experience helped them to make a career decision; 94% stated that they learned more specific information about the career that they did not know before; and 97% would recommend the healthsite experience for a friend.

Nadine Gawlak, of Keyser High School and a participant in the 1990 HCOP at FSU summer enrichment program came to HCOP with interests in medicine, physical therapy, and occupational therapy. After much investigation and a healthsite experience in physical therapy at a local hospital, Nadine decided that PT wasn't for her. At her request, HCOP staff arranged for Nadine to meet with a senior Physician Assistant student, Heather Bates, participating in the



## Overview HCOP Activities

Fall 1990 - Summer 1991

Health Career Group Presentations	32
Presentation Audience	540
Students Receiving Specific Career and Financial Aid Info	460
Students Referred to AHEC Nursing Caucus	99
Individual Health Career Counseling	95
Healthsite Experiences	100+
Accepted into Summer Program (as of mid May)	25

AHEC's *Clinical Education Program*. Afterward, Nadine said, "At first I was unsure, but when I left Heather, my mind was made up. Heather was really excited about what she was doing. And now I know what I'm going to do!" Many HCOP students who participate in the healthsite experiences make this type of career decision.

Twenty-five regional students plan to participate in the third HCOP summer enrichment program to be held at Frostburg State University from June 22 through August 3. In addition to the academic enrichment classes in math, science, and English, students will participate in a series of health care enrichment and personal development days, college and health facility visits, and social activities.

"We've established a strong two-way dialog with each summer participant in an effort to individualize the summer experience," says Debbie Bradley, HCOP Program Coordinator. With individual career goals in mind, each student may enhance the academic classes by viewing health enrichment videos, visiting and observing a health professional at work, or researching an independent project. Special speakers will address particular issues. A unique series of discussion seminars will be conducted to help students explore the connection between interpersonal relationships and drug and alcohol abuse. Students will visit two-year, four-year, and graduate level health professional schools, and several health facilities. Residence hall living will provide tremendous opportunities for

personal growth. For diversion, students may attend campus cultural events and Cumberland Summer Theater, and use the campus physical fitness facilities. Visiting the University of Maryland at Baltimore provides the added bonus of access to the Inner Harbor, Maryland Science Center, and the National Aquarium.

An HCOP computer tracking system is now in place to track students who attend the summer programs. Of the forty-two 1989 and 1990 summer program participants, 85% were still in educational tracks toward a health career at the beginning of the third year of the grant. Most are in pre-professional education programs studying toward goals such as physician, physical therapist, and occupational therapist. The AHEC will track all summer program participants for seven years, up to their first professional job.

During this year, the staff also submitted a proposal for a second phase of funding. In this highly competitive time, the program was approved, but not funded. The support staff at the Division of Disadvantaged Assistance encourages the AHEC to resubmit an application for the next funding cycle. Officially, funding for the HCOP program will end on August 31, 1991. Every effort is being made to sustain HCOP's excellent programming at a limited level throughout the coming fiscal year. The AHEC is seeking alternative fund sources for this year, and will resubmit the grant application for funding beginning in the Fall of '92. HCOP is a program that truly addresses at a grass roots level the region's need to "grow your own" area health professionals.



Ray Spriggs, a 1990 graduate of Bishop Walsh High School in Cumberland, prepares a science lab report while attending the 1990 HCOP summer preliminary education program at FSU.

# Continuing Education

The continuing education programming for the Western Maryland AHEC continues to be very diverse. Programs are designed with the help of our caucuses, the IHEC, and community health professionals. The Western Maryland AHEC enjoys sponsoring programs with regional educational institutions, hospitals, and community agencies. These "free standing" CE programs are in addition to the numerous education programs conducted within the guidelines and sponsorship of the AHEC's thematic grant programs

such as *Rural Training Initiatives in Adolescent Health*, the *Western Maryland Outreach Pilot Project*, and the *Clinical Education Program's* weekly seminars. Details of the thematic CE programs are contained in each program's report.

Currently on the CE drawing board is a professional development seminar series being planned by the Psychology Caucus for this Summer and early Fall.

## 1990 Continuing Education Programs

- ❑ **Changing Your Heart's Lifestyle in the 90's: Cardiovascular Disease Prevention** - conducted November 9, 1990 with Allegany Community College, and the American Heart Association, Western Maryland Division. (*full day*)
- ❑ **Maryland Care Giver Program** - conducted November 16, 1990 by The Center for the Study of Pharmacy and Therapeutics for the Elderly in sponsorship with the AHEC, Sacred Heart Hospital, Allegany County Health Department, Memorial Hospital and Medical Center with the cooperation of the Allegany County Department of Social Services, Frostburg Community Hospital and the Day Care Center of Frostburg Village. (*full day*)
- ❑ **Caring for the Older Adult in Institutional and Ambulatory Care Settings** - conducted April 4, 1991 by the Geriatric and Gerontology Education and Research Program and cosponsored by the AHEC, Maryland Nurses Association-District 8, Washington County Health Department, Washington County Hospital Association, and Washington County Medical Society, Inc. (*full day*)
- ❑ **Oral Medicine Update: 1991** - conducted on April 24, 1991 by Michael A. Siegel, DDS, MS, Assistant Professor in the Department of Oral Medicine and Diagnostic Sciences at the University of Maryland at Baltimore, in cooperation with Allegany Community College and the Allegany/Garrett County Dental Society. (*full day*)
- ❑ **The Future of Medicine** - conducted on June 10, 1991, by Lee Kaiser, PhD, health planner and futurist, cosponsored with Frostburg Community Hospital, Garrett County Memorial Hospital, Memorial Hospital and Medical Center, Sacred Heart Hospital, Maryland Hospital Association, and Washington County Hospital Association. (*3 hours*)
- ❑ **Impact of the Future on Hospitals** - conducted on June 11, 1991, by Lee Kaiser, PhD, health planner and futurist, and Andy Wigglesworth, Vice President of Government Relations Maryland Hospital Association. Cosponsored with Frostburg Community Hospital, Garrett County Memorial Hospital, Memorial Hospital and Medical Center, Sacred Heart Hospital, Maryland Hospital Association, and Washington County Hospital Association. (*full day*)



"Caring for the Older Adult in Institutional and Ambulatory Care Settings" was designed to promote the interdisciplinary care of the older adult by health care professionals. Pictured are: Bruce Kaup, MD, Dept. of Psychiatry at UMAB; Mary Harper, PhD, RN, FAAN, keynote speaker and Coord., Long Term Care Programs, National Institute of Mental Health; Barbara Cahn, PhD, Coord. of UMAB's GGEAR program and Director of Health Care Consulting, Wolpoff & Company; George Taler, MD, Asst. Professor, Div. of Geriatric Medicine, Dept. of Family Medicine at UMAB; and Delores Schoen, PhD, Assoc. Professor of UMAB's School of Nursing.

# GGEAR

The GGEAR Project for Western Maryland begun in 1989 has been completed - in one sense at least. The UMAB based Geriatric and Gerontological Education and Research program - designed to promote interdisciplinary education and research relating to the health care needs of the State's older citizens - authorized the AHEC to study the educational needs of health professionals working with older adults in Western Maryland during a one year period.

But the groups of institutional and agency representatives who met to begin the project found that there was more of a need to step back and research what was happening to the availability of adequate numbers of health personnel in the area. Why is there a persistent need for primary care physicians? What will happen to area health care if the present group of primary care physicians now in their fifties are not replaced by sufficient numbers of primary care physicians during the next 10 years? Why are hospitals having to utilize large sums of funds to recruit personnel? How many health professionals will be available to serve the geriatric population in 5 or 10 years? Will the supply of all needed types be sufficient to assure quality of care?

GGEAR officials permitted the AHEC to pursue the study of area personnel needs with the plan to assess

continuing education needs at a later time. During the course of the past two years, AHEC staff with the cooperation of numerous representatives of various hospitals, nursing homes, and health care agencies developed the report entitled *Health Personnel Needs in Western Maryland: Meeting the Challenges of the 1990's*.

The report contains 13 recommendations that address a continuum of professional development activities necessary to recruit, educate, and retain local people into health care professions and to foster their willingness to locate and maintain a practice locally. Limited space does not allow a reprint of the recommendations, but they are available upon request. A task force comprised of regional health professionals, educators, and community and government representatives is working to develop implementation strategies. The report's two major recommendations call for the creation and construction of an accredited health science education center in Western Maryland, possibly at Frostburg State University, by the year 1995 and for the construction of a health training facility at Allegany Community College to strengthen credit and non-credit program integration and development. The planning report offers many different approaches which can help address the region's need for health professionals.

## Off-Campus Nursing

The Western Maryland AHEC provides the primary on-site support for the University of Maryland School of Nursing's off-campus offerings in Western Maryland. Currently, 18 students in Cumberland and 28 students in Hagerstown are completing the first year of the two year baccalaureate program. In September, the group will begin the first of two 9 credit clinical courses which are the heart of the program. Two Hagerstown students graduated from the BSN program in May. Students in the outreach master's degree program continue to attend class in Hancock.

Interest has been high for a proposed master's level nurse practitioner program to be based in Cumberland. In addition, a traditional program has been proposed for the western portion of the service

region. Both of these programs would reduce travel time, since classes would be held in Allegany rather than Washington county. Grant applications have been submitted for both programs.

One of the greatest challenges for the outreach program this year has been to accommodate the large number of applicants to a program with dwindling resources. According to Gail Mazzocco, EdD, RN, Assistant Professor with the outreach program, "Western Maryland AHEC continues to support the need for local nursing programs by lobbying when and where it is necessary. That help, along with a wide variety of other educational support services, makes Western Maryland AHEC invaluable to the School of Nursing's programs."

# Caucus Reports

## Dental Caucus

John Davis, DDS

Provided preceptor services for one student from the UMAB College of Dental Surgery with five local dentists serving as preceptors.

Generated information for an annual plan for the IHEC's planning process.

Cosponsored "Oral Medicine Update: 1991," a continuing education program with ACC, and arranged for availability of continuing education credits.

Reviewed plans for the implementation of the adolescent health program and provided recommendations for dental participation in the program.

Arranged for a GRATEFUL MED demonstration at an Allegany/Garrett Dental Society meeting.

Guided a staff review of dental service availability in the Westernport area.

Reviewed the progress on the GGEAR report assessment of area health personnel needs and provided recommendations on dental needs to be included in the report.

Continued support for library services for the Allegany/Garrett Dental Society.



Joseph Nelson, DDS, Jack Arch, DDS, and Frank LaParle, DDS, attended a GRATEFUL MED demonstration at an Allegany/Garrett County Dental Society Meeting.



Heather Bates, physician's assistant student from Alderson-Broadus College, completed a clinical education experience under the preceptorship of Dr. Bollino.

## Medical Caucus

V. Raul Felipa, MD

Provided preceptor services for 27 medical students through the contributions of over 35 physicians.

Began review with representatives of the UMAB Ambulatory Care program of the need for restructuring medical student rotations.

Received reports on operation of other rotation sites.

Examined plan for medical involvement in the adolescent health special initiatives program and in the related physician training programs.

Reviewed the progress and recommendations for the GGEAR health personnel needs report.

Guided the planning for training of physicians in the use of the NLM GRATEFUL MED services.

Provided case study leadership in the AHEC *Clinical Education Program* seminar.

Received a description of Garrett county health professionals' use of the WVU School of Medicine based MARS system which provides phone accessible consultation on diagnosis and treatment decisions.

Reviewed a draft of a brochure prepared for use in physicians' offices on participation in the AHEC Clinical Education Program.

Generated information on a caucus annual plan for the IHEC and future caucus planning.



## Nursing Caucus

Charity Dean, RN, BSN

Provided a critical examination of the GGEAR report recommendations relating to area nursing education needs.

Reworked mission statement for caucus and reorganized caucus membership.

Completed annual plan for IHEC planning.

Received a HCOP report on high school students from seven counties who are interested in nursing education programs.

Prepared and sent a letter to 96 graduating senior high school students who expressed interest in a nursing career.

Organized tours of hospitals for high school students interested in nursing.

Participated in a NLM GRATEFUL MED training program provided by AHEC staff.

Received status reports on the UMAB Nursing Outreach Program.



Diane Elliott, Theresa Hershberger, and Anita Blauch, students in the University of Maryland Master's in Nursing Outreach program learn how to use GRATEFUL MED software to conduct literature searches. The demonstration and instruction took place at Memorial Hospital.



Pizza—its a quick and easy supper for the Clinical Education students after the evening interdisciplinary seminar.

## Pharmacy Caucus

Robert Martin, Jr., RPh

Provided preceptor services for 28 students from UMAB, Duquesne, and West Virginia University Schools of Pharmacy.

Planned and organized training for area pharmacists on the NLM GRATEFUL MED on-line database access program.

Organized a visit for UMAB Acting Dean Dr. David Knapp and reviewed with him the plans for the new PharmD program and other matters of professional interest.

Received reports on the progress of the AHEC adolescent health program, the UMAB Computer Based Drug Information Program, and the Western Maryland GGEAR report.

Revised the pharmacy preceptor agreement form for use with area pharmacy preceptors.

Prepared caucus annual plan for IHEC planning.

Authorized representatives to make visits to recruit pharmacy students for PEP rotations at area pharmacies and institutions.

## Psychology Caucus

Karen Golden, EdD

Generated multi-faceted planning for Category A and Category B continuing education opportunities for area psychologists.

Established committees to assess continuing education interests and to identify area resource options for continuing education presentations.

Reviewed recommendations to be included in the GGEAR report relative to ways of expanding area health career education.

Received a report on the training available with the NLM GRATEFUL MED outreach pilot project.

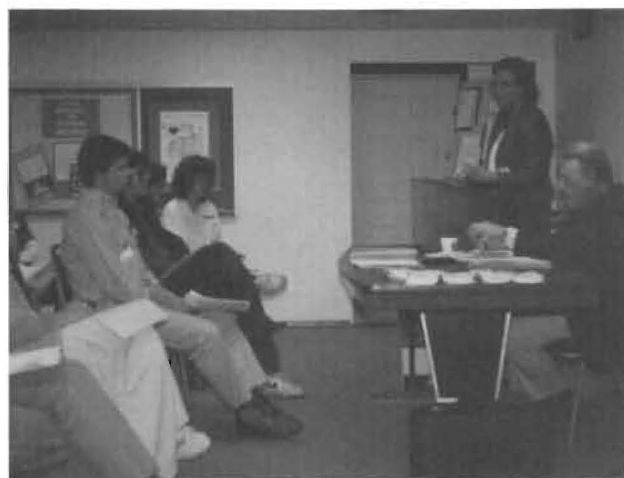
Discussed a report on the adolescent health education program and provided volunteers for related committees.

Maintained representation on the Allegany County Task Force on AIDS.

Authorized preparation of caucus annual plan to be used for IHEC planning.



The AHEC continues to be an active member of the Allegany County AIDS Task Force - Pictures are three members of the committee: Ann Bristow, PhD, Psychology Dept., Frostburg State University and Psychology Caucus representative; Carolyn Clauson-Andrews, LCSW, Community Resource Coordinator, Finan Center and Social Work Caucus representative; and Chris Schaefer, AA, Regional AIDS Educator, Allegany County Health Department.



(at podium) Iona Hiland, DSW, Acting Asst. Dean for Field Instruction, and Thomas Vassil, PhD, Associate Dean of UMAB School of Social Work came to Western Maryland to meet prospective students interested in an outreach MSW program. Over 100 area residents expressed interest in enrolling.

## Social Work Caucus

Sylvia Vaught, MSW

Advocated with UMAB School of Social Work for the development of an outreach MSW program for Western Maryland as is available on the Eastern Shore.

Received support from Dean Howard Altstein of the School of Social Work to begin planning for an MSW program for the fall of 1992.

Conducted an area wide survey on interest in program and on availability of field instruction sites.

Identified approximately 100 prospective students for a Western Maryland MSW program to be based at the AHEC.

Conducted meetings with UMAB representatives and student candidates.

Expanded membership.

Provided representation on the Allegany County Task Force on AIDS and the Adolescent Health Coalition.

Conducted a social worker survey regarding caucus programming.

Conducted regular caucus meetings which included guest presentations by Barbara Boyle, Melissa Jackson, Betty Wiedemann, Kathy Lese, and Amy Blank.

Voted to have the caucus become an affiliate of the Maryland Chapter of the NASW.

Prepared an annual plan for the IHEC and future caucus use.

# Student Comments

## 1990 - 1991

"The way the seminars were set up (especially case studies and discussion with audience participation) helped me to understand how a 'team' can work together to benefit patients."

"By working in a private practice where resources were limited, I sharpened my clinical skills immensely. I was not always able to get whatever test I wanted to get and was therefore forced to figure things out clinically."

"I enjoyed the relaxed pace of learning (regular hours, etc.) yet felt I learned a lot due to the one on one nature of the placement - I was able to go over every case that I wanted to and discuss the patient as much as I needed."

"I hope UMAB continues to support AHEC this is a very good program!!"

"This was the first time I spent time with a private doc. I have learned about the day to day operation of private practice. The most outstanding memory about Oakland will be the friendliness of the staff at Garrett Memorial Hospital."

"I learned a lot during this rotation. I will rate my experience as one of the top rotations in medical school."

"I learned how to treat common problems. This is not taught elsewhere in medical school. I also learned a lot about the logistics of running an office, and how billing is done, something else that is not taught in Medical School."

"I got to see an unusually large number of patients and this experience in itself benefitted my interpersonal skills and bedside manner. I also saw people from a very different background than one sees in inner city hospitals."

"Gained a greater understanding of other medical professions and services offered."

"More people need to be encouraged to do a rotation at Western Maryland AHEC."

"That interpersonal relationship among co-workers, empathy and the communication courses taught in school are more important than I thought."

"I enjoyed being able to follow my own set of patients and being able to track their progress and for a large part call the shots."

"Has shown me how much health professionals are needed in areas like this and how they are more appreciated."

"The physicians were unusual, very different from one another, and interesting. They also willingly counseled about lifestyles, future expectations as a MD, etc."

"Besides the increase in knowledge and experience I really met very good people who helped me get a fresh look at medicine."

"I think I was able to be a link between patients and physicians."

"I learned a great deal about medicine, life (both in and out of the hospital), and death."

"My experiences have exceeded, beyond belief, my expectations."

# Financial Profile

July 1, 1990 - June 30, 1991

## Income

Maryland Statewide Medical Education and Training System	\$306,346
Health Careers Opportunity Program (Federal HCOP Grant): Eastern Alleghenies HCOP Program	184,754
Geriatric and Gerontological Education Research Program	6,250
Rural Master's Outreach Nursing Program (UMAB School of Nursing)	3,000
Regional Medical Library Outreach Pilot Program	44,398
Health Professional Education Assistance (Federal AHEC Funds): Rural Training Initiatives in Adolescent Health	<u>71,700</u>
	\$616,448
	=====

## Line Item Expenditures

Personnel and Contractual Salaries	\$385,500
Communications	15,700
Printing and Supplies	32,787
Equipment and Equipment Contracts	17,093
Office Operations	29,981
Travel	20,747
Student Programs - Direct Costs	109,419
Learning Resources	<u>5,221</u>
	\$616,448
	=====

## Expenditures by Functional Category

Career Recruitment	\$193,777
Clinical Education Program	87,777
Administration - WM AHEC	65,739
Learning Resource Services	90,222
Continuing Education	97,979
Off-Campus Program Support	10,989
Regional Health Personnel Planning	10,119
Program Development	23,975
Public Information	15,789
Board, IHEC, and Caucus Activity	12,093
Community Health Education	<u>7,989</u>
	\$616,448
	=====

# Directory

## Board of Directors

Anthony Bollino, MD, *Chair*  
 Barbara Boyle, LCSW, *Vice-Chair*  
 Gail Mazzocco, EdD, RN, *Secretary*  
 Barbara Roque, JD, *Treasurer*  
 Gerald E. Beachy, PD  
 Anna Clauson, MS, RN  
 Carolyn Clauson-Andrews, LCSW  
 Karen Golden, EdD  
 Walid Hijab, MD

James Hudson, MD  
 Charles Ifeachor, PharmD  
 Helen Kohler, PhD, RN  
 Frank LaParle, DDS  
 Renate E. Pore, PhD, MPH  
 Donald Richter, MD  
 Lee Ross, PhD  
 Donna Walbert, MS, RN  
 Delegate Betty Workman

## Interdisciplinary Health Education Council

Donna Walbert, MS, RN, *Chair*  
 James Bellard, MD  
 Glen Besa, JD  
 Jan Chippendale, MSW  
 Beckey Harvey, RN, MBAC  
 James Holwager, EdD

Elaine Keane, OTR/L  
 Jim Kessell, PD  
 Philip H. Lavine, MD  
 Paul McAllister, DDS  
 Katie Murray, BA  
 Suanne Ostendorf, MS

## Professional School Liaisons University of Maryland System

Ambulatory Care:  
 Dental:  
 Health Education:  
 Medical Technology:  
 Nursing:  
 Pharmacy:  
 Physical Therapy:  
 Primary Care:  
 Social Work:

Sallie Rixey, MD  
 Mark Wagner, DMD  
 Patricia Alt, PhD  
 Terry Reynolds, BS  
 Helen Kohler, PhD, RN  
 Marvin L. Oed, BS Pharm  
 Cheryl Spezzano, RPT  
 Mohamed Al-Ibrahim, MD  
 Iona Hiland, DSW

## Maryland Statewide Medical Education & Training System

Richard D. Richards, MD, Acting Dean, School of Medicine  
 James I. Hudson, MD, Associate Dean for Administration, School of Medicine

# Directory

## Western Maryland AHEC Staff

### Central Program Staff

Executive Director:	Donald L. Spencer, MPA
Director of Operations:	Marie Potts-Deakin, MBA
Clinical Education Coordinator:	B. Ruth Wood, MS, RN
Learning Resource Services Coordinator:	Kathleen A. Lese, MT, MA
Bookkeeper:	Robin M. Deter
Office Service Coordinator:	Pamela S. Patch, AA
Secretary:	Bonnie M. Lewis
Health Administration Intern:	G. Gene Turner, II, BA
RSVP Volunteer:	Nellie Mock, RN
Housekeeper:	Mary Clites

### Grant Program Staff

#### HCOP

Program Coordinator:	Deborah M. Bradley, MEd
Health Careers Education Specialist:	Suzanna S. Dotson, MEd
Secretary:	Rebecca R. Whitehill

#### Rural Training Initiatives in Adolescent Health

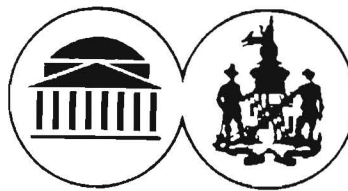
Adolescent Education Coordinator:	Susan O. Davis, MEd
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#### Western Maryland Outreach Pilot Project

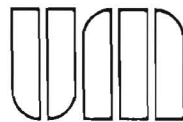
RML Project Coordinator:	Kathleen A. Lese, MT, MA
Library Assistant:	D. Michele Beaulieu, RN

### Nursing Outreach Program Staff

Coordinator/Faculty member:	Gail Mazzocco, EdD, RN
Faculty member:	Susan Coyle, MS, RN



Maryland Statewide  
Medical Education  
and Training  
System



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